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APPLICANTS.
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**** CONTINUING DATA *******
THIS APPLICATION IS A CIP OF 09/636,039 08/09/2000
AND IS A CIP OF 09/483,092 01/14/2000
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AND IS A CIP OF 08/995,616 12/22/1997 *Yes UB*

**** FOREIGN APPLICATIONS ******* *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 08/08/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>UB</i>				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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FILING FEE RECEIVED 1554	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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